



PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)

Docket Number: 742439-27

In re Application of: Megan BOUGUENON et al.

Application Number: 10/559,579

Filed: December 5, 2005

For: A METHOD OF COLLECTING DATA REGARDING A PLURALITY OF WEB PAGES VISITED BY AT LEAST ONE USER

Group Art Unit

Confirmation No. 3837

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.

The requested extension and appropriate entity fee are as follows
(check time period desired):

- ☐ One month (37 CFR 1.17(a)(1)) - (\$60/\$120) \$ _____
- ☒ Two months (37 CFR 1.17(a)(2)) - (\$225/\$450) \$225.00
- ☐ Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020) \$ _____
- ☐ Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590) \$ _____
- ☐ Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160) \$ _____

☒ Applicant claims small entity status.

☐ A check to cover the fee is enclosed.

☐ Payment by credit card. Form PTO-2038 is attached.

☐ The Commissioner has already been authorized to charge fees in this application to a Deposit Account.

☒ The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 19-2380 (742439-27). I have enclosed a duplicate copy of this sheet.

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

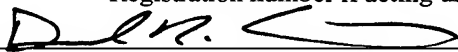
I am the ☐ applicant/inventor

☐ assignee of record of the entire interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ attorney or agent of record.

☐ attorney or agent under 37 CFR 1.34(a).

Registration number if acting under 37 CFR 1.34(a) _____



Signature

July 13, 2006

Date

Donald R. Studebaker

Typed or printed name

(202) 585-8000

Telephone Number

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ Total of _____ forms are submitted.

SEND TO: Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450